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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<b>Attorney Docket No.</b> IIW-033	
		<b>First Inventor</b> Akio Yamamoto	
		<b>Title</b> APPARATUS FOR DILUTION OF DISCHARGED FUEL	
		<b>Express Mail Label No.</b> EV 309 881 800 US	

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>	<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small> 2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small> 3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages <b>14</b>]</span> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> <li>- Descriptive title of the invention</li> <li>- Cross Reference to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (if filed)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul> 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets <b>6</b>]</span> 5. Oath or Declaration <span style="float: right;">[Total Sheets <b>6</b>]</span> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small> 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate; large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or   ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies <b>ACCOMPANYING APPLICATION PARTS</b> 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small> 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small> 17. <input checked="" type="checkbox"/> Other: Return Receipt Postcard
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

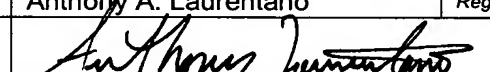
**For CONTINUATION OR DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number: <b>00959</b>	OR	<input type="checkbox"/> Correspondence address below
<b>Name</b> LAHIVE & COCKFIELD, LLP Anthony A. Laurentano		
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<b>City</b> Boston	<b>State</b> MA	<b>Zip Code</b> 02109
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<b>Name (Print/Type)</b> Anthony A. Laurentano	<b>Registration No. (Attorney/Agent)</b> 38,220
<b>Signature</b> 	<b>Date</b> October 1, 2003

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 309 881 800 US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

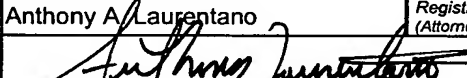
Dated: October 1, 2003

Signature: 

(Anthony A. Laurentano)

FEE TRANSMITTAL for FY 2004		Complete if Known	
Effective 10/01/2003, Patent fees are subject to annual revision.		Application Number	NEW APPLICATION
		Filing Date	Concurrently Herewith
		First Named Inventor	Akio Yamamoto
		Examiner Name	Not Yet Assigned
		Art Unit	N/A
		Attorney Docket No.	IIW-033
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<b>TOTAL AMOUNT OF PAYMENT</b> (\$)		770.00	

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)			
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES			
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP					
The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.					
FEE CALCULATION					
<b>1. BASIC FILING FEE</b>					
Large Entity	Small Entity				
Fee Code	Fee Code	Fee (\$)	Fee (\$)		
1001	2001	385	Utility filing fee	770.00	
1002	2002	170	Design filing fee		
1003	2003	265	Plant filing fee		
1004	2004	385	Reissue filing fee		
1005	2005	80	Provisional filing fee		
<b>SUBTOTAL (1)</b>		(\$)		770.00	
<b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b>					
Total Claims	6	-20** =	Extra Claims	Fee from below	Fee Paid
Independent Claims	1	-3** =			0.00
Multiple Dependent					
Large Entity	Small Entity				
Fee Code	Fee Code	Fee (\$)	Fee (\$)	Fee Description	
1202	2202	9	Claims in excess of 20		
1201	2201	43	Independent claims in excess of 3		
1203	2203	145	Multiple dependent claim, if not paid		
1204	2204	43	** Reissue independent claims over original patent		
1205	2205	9	** Reissue claims in excess of 20 and over original patent		
<b>SUBTOTAL (2)</b>		(\$)		0.00	
**or number previously paid, if greater; For Reissues, see above					
SUBMITTED BY		(Complete (if applicable))			
Name (Print/Type)	Anthony A. Laurentano	Registration No. (Attorney/Agent)	38,220	Telephone	(617) 227-7400
Signature		Date	October 1, 2003		

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Dated: October 1, 2003

Signature:  (Anthony A. Laurentano)